Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 1 of 56

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF NEW YORK | = | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identity Yourself | | |
|-----|---|---|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licer Brin- iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee. | E. Middle name Gratton Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-3968 | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 2 of 56

Debtor 1 Danielle E. Gratton Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 68 Lock St. | If Debtor 2 lives at a different address: |
| | | Phoenix, NY 13135 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Oswego | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 3 of 56

Case number (if known) Debtor 1 Danielle E. Gratton

| • | The chapter of the Bankruptcy Code you are choosing to file under | | | orief description of each, see <i>Notice Req</i> , go to the top of page 1 and check the a | uired by 11 U.S.C. § 342(b) for Individuals Filing opropriate box. | for Bankruptcy |
|----|---|--------------|-----------------------|---|--|--|
| | choosing to file under | ■ Chapte | r 7 | | | |
| | | ☐ Chapte | r 11 | | | |
| | | ☐ Chapte | r 12 | | | |
| | | ☐ Chapte | r 13 | | | |
| | How you will pay the fee | abou orde | it how y r. If you | ou may pay. Typically, if you are paying t | ase check with the clerk's office in your local counter fee yourself, you may pay with cash, cashier's your behalf, your attorney may pay with a credit | s check, or money |
| | | | | | this option, sign and attach the Application for Ir | ndividuals to Pay |
| | | | - | ee in Installments (Official Form 103A). | his option only if you are filing for Chapter 7. By | law a judge may |
| | | but is | s not red es to yo | juired to, waive your fee, and may do so ur family size and you are unable to pay | only if your income is less than 150% of the office the fee in installments). If you choose this option yed (Official Form 103B) and file it with your petit | ial poverty line than, you must fill out |
| | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes. | | | | |
| | | | District | When | Case number | |
| | | | District | When | | |
| | | | District | When _ | Case number | |
|). | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | | Debtor | | Relationship to you | |
| | | | District | When | Case number, if known | |
| | | | Debtor | | Relationship to you | |
| | | | District | When _ | Case number, if known _ | |
| | Do you rent your residence? | □ No. | Go to | line 12. | | |
| l. | residerice : | _ | Has y | our landlord obtained an eviction judgme | nt against you? | |
| 1. | residence: | Yes. | - | | | |
| 1. | residence : | ■ Yes. | • | No. Go to line 12. | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

Document Page 4 of 56 Case number (if known) Debtor 1 Danielle E. Gratton Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 5 of 56

Debtor 1 Danielle E. Gratton Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Page 6 of 56 Document

Case number (if known)

| Debt | or 1 Danielle E. Gratto | n | Dodanic | | Case numbe | (if known) |
|-------|--|----------------------|---|----------------------------|------------------------|---|
| Part | 6: Answer These Quest | ions for Rep | orting Purposes | | | |
| | What kind of debts do you have? | | re your debts primarily condividual primarily for a pers | | | ned in 11 U.S.C. § 101(8) as "incurred by an |
| | | | No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | re your debts primarily bu | | | |
| | | | No. Go to line 16c. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16c. S | tate the type of debts you o | we that are not consun | ner debts or busines | s debts |
| | Are you filing under Chapter 7? | □ No. I | am not filing under Chapter | 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | | am filing under Chapter 7. E re paid that funds will be av | | | erty is excluded and administrative expenses |
| | administrative expenses | | No | | | |
| | are paid that funds will be available for | Г |] Yes | | | |
| | distribution to unsecured creditors? | | - 100 | | | |
| | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | □ 25,001-50,000 |
| | you estimate that you owe? | ☐ 50-99 | | 5001-10,000 | | 5 0,001-100,000 |
| | owe: | □ 100-199 | | 1 0,001-25,00 | 00 | ☐ More than100,000 |
| | | □ 200-999 | | | | |
| | How much do you | | ,000 | □ \$1,000,001 - | \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | - \$100,000 | □ \$10,000,001 | | ☐ \$1,000,000,001 - \$10 billion |
| | | | 1 - \$500,000 | \$50,000,001 | | ☐ \$10,000,000,001 - \$50 billion |
| | | □ \$500,00 | 1 - \$1 million | \$100,000,00 | 1 - \$500 million | ☐ More than \$50 billion |
| | How much do you | □ \$0 - \$50 | ,000 | □ \$1,000,001 - | \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | - \$100,000 | \$10,000,001 | | \$1,000,000,001 - \$10 billion |
| | | | 1 - \$500,000 | \$50,000,001 | | ☐ \$10,000,000,001 - \$50 billion |
| | | □ \$500,00 | 1 - \$1 million | \$100,000,00 | 1 - \$500 million | ☐ More than \$50 billion |
| Part | 7: Sign Below | | | | | |
| For y | y ou | I have exan | nined this petition, and I dec | clare under penalty of p | erjury that the inforn | nation provided is true and correct. |
| | | | | | | under Chapter 7, 11,12, or 13 of title 11, loose to proceed under Chapter 7. |
| | | | ey represents me and I did not be a likely and I did not be a likely and read the | | | t an attorney to help me fill out this |
| | | I request re | lief in accordance with the c | chapter of title 11, Unite | ed States Code, spec | cified in this petition. |
| | | bankruptcy and 3571. | case can result in fines up t | | | or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Danielle E | le E. Gratton E. Gratton | | Signature of Debtor | r 2 |
| | | Signature of | | | <u> </u> | |
| | | Executed o | n April 19, 2019 | | Executed on | |
| | | | MM / DD / YYYY | | - NANA | / DD / YYYY |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 7 of 56

Debtor 1 Danielle E. Gratton Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Peter C Schaefer, Esq. | Date | April 19, 2019 |
|--|---------------|----------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Peter C Schaefer, Esq. 510900 New York | | |
| Peter C. Schaefer, Esq. | | |
| 313 East Willow Street Suite 105 | | |
| Syracuse, NY 13203-1905 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (315)478-2020 | Email address | schapc@aol.com |
| 510900 New York NY | | |
| Day no seekay 9 Ctata | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

| | | Docume | ent Page 8 of 56 | |
|---------------------|--------------------------|-------------------|------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Danielle E. Gratto | on | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fa | **** 106Cum | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|---|-------------|-----------------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 26,955.70 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 26,955.70 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | l iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 10,481.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 61,860.81 |
| | Your total liabilities | \$ | 72,341.81 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,378.76 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,360.99 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a persona | l, family, or |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Page 9 of 56
Case number (if known) Document

Debtor 1 Danielle E. Gratton

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,883.83

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on <i>Schedule E/F</i> , copy the following: | Tota | l claim |
|--|------|-----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 25,806.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 25,806.00 |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 10 of 56

| Fill in this inf | ormation to identify your | case and this filing: | cht rade 10 01 30 | | |
|---|--|---|--|--|--|
| Debtor 1 | Danielle E. Gratto | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case number | | | | | ☐ Check if this is an amended filing |
| | | | | | amended ming |
| Official F | Form 106A/B | | | | |
| | ıle A/B: Prop | erty | | | 12/15 |
| think it fits best information. If n Answer every q | . Be as complete and accurat nore space is needed, attach a uestion. | te as possible. If two marri a separate sheet to this fo | once. If an asset fits in more than or ied people are filing together, both a rm. On the top of any additional pag | re equally responsible for sup | oplying correct |
| Part 1: Descri | be Each Residence, Building | , Land, or Other Real Esta | te You Own or Have an Interest In | | |
| 1. Do you own | or have any legal or equitable | interest in any residence, | building, land, or similar property? | | |
| No. Go to | Part 2. | | | | |
| ☐ Yes. Whe | re is the property? | | | | |
| Part 2: Descri | ibe Your Vehicles | | | | |
| | drives. If you lease a vehicle, trucks, tractors, sport uti | | dule G: Executory Contracts and U | nexpired Leases. | |
| 3.1 Make: | Chevrolet | Who has an inte | erest in the property? Check one | Do not deduct secured cla | ims or exemptions. Put |
| Model: | Cruze | Debtor 1 only | | the amount of any secure Creditors Who Have Clain | |
| Year: | 2014 | ☐ Debtor 2 only | | Current value of the | Current value of the |
| • • • | | 000 ☐ Debtor 1 and | • | entire property? | portion you own? |
| | formation: with father titled 1/31/19 |) _ | of the debtors and another is community property | \$6,940.00 | \$3,470.00 |
| | | (see instruction | is) | | |
| Examples: B ■ No □ Yes 5 Add the do pages you | Boats, trailers, motors, perso | onal watercraft, fishing ve ou own for all of your o Write that number here | enal vehicles, other vehicles, and essels, snowmobiles, motorcycle actions of the state of the s | y entries for | \$3,470.00 |
| | or have any legal or equita | | ne following items? | | Current value of the |
| | | | | į | ortion you own? On not deduct secured laims or exemptions. |
| 6. Household | goods and furnishings | | | | |

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Schedule A/B: Property Official Form 106A/B

| C | tase 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:2 | L9 Desc Main |
|------------------------------|---|---|
| Debtor 1 | Danielle E. Gratton Document Page 11 of 56 Case number (if known) | |
| Yes. | Describe | |
| | Misc. Household Goods and Furnishings | \$3,000.0 |
| □ No | nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of including cell phones, cameras, media players, games Describe | collections; electronic devices |
| | 42" TV (\$25.00); laptop computer (\$25.00) | \$50.0 |
| Examp | ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles Describe | , or baseball card collections; |
| Examp. No | nent for sports and hobbies Nes: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments Describe | and kayaks; carpentry tools; |
| ■ No | ms ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe | |
| □ No | ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe | |
| | Misc. Clothing | \$600.0 |
| ■ No □ Yes. 13. Non-fa Exam | ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g Describe arm animals ples: Dogs, cats, birds, horses | gold, silver |
| ■ No □ Yes. | Describe | |
| ■ No | ther personal and household items you did not already list, including any health aids you did not list Give specific information | |
| | the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here | \$3,650.00 |
| Part 4: De | escribe Your Financial Assets | |
| Do you o | wn or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Page 12 of 56

Case number (if known) Document Danielle E. Gratton Debtor 1 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash on Hand (being held by debtor's \$7,000.00 grandmother) 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$123.00 M&T Bank, Account No. x8698 Checking M&T Bank, Account \$300.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No \square Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401k D.L. Manufacturing, Inc. Retirement Savings \$5,492.70 Plan 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes.

Rental deposit \$675.00 rental security deposit

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes..... Issuer name and description.

| Debtor | | Doc 1 Filed 04/19/1 Document | Page 13 of 56 | 4/19/19 16:26:19 ase number (if known) | Desc Main |
|------------|--|-------------------------------------|--------------------------|--|---|
| 24 Inte | erests in an education IRA, in an ac | count in a qualified ABLE prod | | ` ′ == | m. |
| 26 l | U.S.C. §§ 530(b)(1), 529A(b), and 529 | | ram, or ander a quar | med state tutton progra | |
| ■ N | | nd description. Separately file the | records of any interes | sts.11 U.S.C. § 521(c): | |
| | usts, equitable or future interests in | nroperty (other than anything | listed in line 1) and | rights or nowers exercis | sable for your benefit |
| ■ N | | property (other than anything | nated in line 1), and | riginis or powers exercis | able for your belieff. |
| | es. Give specific information about the | hem | | | |
| Ex ■ N | • | sites, proceeds from royalties an | | s | |
| ЦΥ | es. Give specific information about the | hem | | | |
| | enses, franchises, and other gener camples: Building permits, exclusive li- | | holdings, liquor licens | es, professional licenses | |
| | es. Give specific information about the | hem | | | |
| Money | or property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ n | No /es. Give specific information about th | nem, including whether you alrea | | I the tax years | \$2,745.0 |
| | | | | | |
| | | Accured anticipated 2019 | refund | Federal & State | \$3,500.0 |
| Ex ■ N | mily support camples: Past due or lump sum alimor No 'es. Give specific information | ny, spousal support, child suppor | t, maintenance, divord | e settlement, property set | tlement |
| | her amounts someone owes you kamples: Unpaid wages, disability insu benefits; unpaid loans you m | | fits, sick pay, vacation | pay, workers' compensat | ion, Social Security |
| _ | es. Give specific information | | | | |
| | erests in insurance policies | rance; health savings account (H | SA); credit, homeowne | er's, or renter's insurance | |
| | <i>camples:</i> Health, disability, or life insur | | | | |
| | • | | Beneficiary | r. | Surrender or refund value: |

Schedule A/B: Property

someone has died.

 \square Yes. Give specific information..

■ No

Official Form 106A/B

page 4

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 14 of 56

| Deb | or 1 Danielle E. Gratton | | Case number (if known) | |
|--------------|--|------------------------------|--------------------------------|--------------|
| | Claims against third parties, whether or not you have filed a la Examples: Accidents, employment disputes, insurance claims, or | | and for payment | |
| | No | · | | |
| | Yes. Describe each claim | | | |
| 34. (| Other contingent and unliquidated claims of every nature, inc | luding counterclaims | of the debtor and rights to se | t off claims |
| | No | 3 | | |
| | Yes. Describe each claim | | | |
| 35. | ny financial assets you did not already list | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| 36. | Add the dollar value of all of your entries from Part 4, includ for Part 4. Write that number here | | ' - | \$19,835.70 |
| Part | Describe Any Business-Related Property You Own or Have an Int | erest In. List any real esta | ate in Part 1. | |
| 37. D | o you own or have any legal or equitable interest in any business-rela | ated property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| | | | | |
| Part | Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. | ou Own or Have an Interes | st In. | |
| 46. [| o you own or have any legal or equitable interest in any farn | n- or commercial fishin | ng-related property? | |
| | No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| | | | | |
| Part | Describe All Property You Own or Have an Interest in That Y | ou Did Not List Above | | |
| | Oo you have other property of any kind you did not already lise Examples: Season tickets, country club membership | st? | | |
| _ | No | | | |
| L | Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write t | that number here | | \$0.00 |
| ٠ | , | | | |
| Part | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$3,470.00 | | φυ.υυ |
| 57. | Part 3: Total personal and household items, line 15 | \$3,650.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$19,835.70 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$26,955.70 | Copy personal property total | \$26,955.70 |
| 63 | Total of all property on Schedule A/B Add line 55 + line 62 | | | \$26,055,70 |

Official Form 106A/B Schedule A/B: Property page 5

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

| | Docume | | <u> </u> |
|--------------------------|-------------------|---|---|
| mation to identify your | case: | | |
| Danielle E. Gratto | on | | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | |
| | | | ☐ Check if this is an amended filing |
| | Pirst Name | Danielle E. Gratton First Name Middle Name First Name Middle Name | Danielle E. Gratton First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Property | You | Claim as | Exempt |
|---------|----------|--------------|-----|----------|--------|
| | | | | | |

| | ☐ You are claiming state and federal nonbar | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
|----|--|--|-------|---|------------------------------------|--|--|--|--|
| | ■ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | | |
| | Misc. Household Goods and Furnishings | \$3,000.00 | | \$3,000.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 42" TV (\$25.00); laptop computer (\$25.00) | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Misc. Clothing Line from Schedule A/B: 11.1 | \$600.00 | | \$600.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Holli Golleddie AVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Cash on Hand (being held by debtor's grandmother) | \$7,000.00 | | \$7,000.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Line from Schedule A/B: 16.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Checking: M&T Bank, Account No. x8698 | \$123.00 | | \$123.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 16 of 56

Debtor 1 Danielle E. Gratton Case number (if known)

| | | | | , | | |
|----|---|--------------------------------------|--|---|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | The state of the s | | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Savings: M&T Bank, Account Line from Schedule A/B: 17.2 | \$300.00 | | \$300.00 | 11 U.S.C. § 522(d)(5) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 401k: D.L. Manufacturing, Inc. Retirement Savings Plan | \$5,492.70 | | \$5,492.70 | 11 U.S.C. § 522(d)(12) | |
| | Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Rental deposit: rental security deposit | \$675.00 | | \$232.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 22.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | State: anticipated 2018 NYS tax refund | \$2,745.00 | | \$2,745.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Federal & State: Accured anticipated | \$3,500.00 | | \$3,500.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 28.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every | | | led on or after the date of adjustme | nt.) | |
| | _ | red by the evenotion w | ithin 4 | 24E days before you filed this see | .2 | |
| | ☐ Yes. Did you acquire the property cove☐ No | red by the exemption wi | iunin 1 | ,∠15 days before you filed this case | 9 f | |
| | ☐ Yes | | | | | |
| | | | | | | |

| | Case 19-3 | 30544-5-mc | | Filed 04/19/ Document | 19 Ent | ered 04/19/19 7 of 56 | 16:26:19 Des | sc Main |
|---------|--|----------------------|--------------------|---|--------------------|--|---|--------------------------|
| Fill | in this information | n to identify you | | | | | | |
| Deb | tor 1 D a | anielle E. Gratt | on | | | | | |
| | | st Name | Middle N | ame | Last Name | | | |
| | tor 2 use if, filing) Fire | st Name | Middle N | ame | Last Name | | - | |
| Unit | ed States Bankrup | tcy Court for the: | NORTHER | N DISTRICT OF NEV | W YORK | | | |
| Cas | e number | | | | | | - | |
| (if kno | | | | _ | | | ☐ Check | if this is an |
| | | | | | | | amen | ded filing |
| Off | icial Form 10 | 06D | | | | | | |
| | | | Who Ha | ve Claims S | Secure | d by Propert | V | 12/15 |
| | iledale b. | <u>Creditors</u> | vviio i ia | ve claims c | Jecui e | a by i topert | <u>y </u> | 12/13 |
| s ne | | | | | | | upplying correct information in nal pages, write your na | |
| | any creditors have | claims secured by | your property? | | | | | |
| | □ No. Check this | box and submit th | is form to the c | ourt with your other s | schedules. Y | ou have nothing else t | o report on this form. | |
| | ■ Yes. Fill in all of | f the information b | elow. | · | | · · | • | |
| | | ured Claims | | | | | | |
| | | | are then one see | urad alaima liat tha arad | litar aanaratah | . Column A | Column B | Column C |
| for e | ach claim. If more the | an one creditor has | a particular claim | ured claim, list the cred , list the other creditors g to the creditor's name | in Part 2. As ´ | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Americu Cu | | Describe the pr | operty that secures th | ne claim: | \$10,481.00 | \$6,940.00 | \$3,541.00 |
| | Creditor's Name | | 2014 Chevro | olet Cruze 65000 | miles | | | |
| | Attn: Bankrup | • | Joint with fa | ther titled 1/31/19 | 9 | | | |
| | 1916 Black Riv Boulevard | ver | | ou file, the claim is: C | check all that | | | |
| | Rome, NY 134 | 40 | apply. Contingent | | | | | |
| | Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | | |
| | • | • | ☐ Disputed | | | | | |
| Who | o owes the debt? | Check one. | | Check all that apply. | | | | |
| | Debtor 1 only | | ☐ An agreemer | nt you made (such as m | ortgage or sec | cured | | |
| | Debtor 2 only | | car loan) | | | | | |
| | Debtor 1 and Debtor 2 | 2 only | ☐ Statutory lier | (such as tax lien, mech | nanic's lien) | | | |
| | at least one of the deb | • | | n from a lawsuit | , | | | |
| | Check if this claim re community debt | | _ | ing a right to offset) _ | | | | |
| | | Opened | | | | | | |
| | | 09/16 Last Active | | | | | | |
| Date | e debt was incurred | 3/28/19 | Last 4 di | gits of account numb | er 0001 | | | |
| | | | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$10,481.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$10,481.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

| Ouse | 10 00044 0 11101 | Doci | ument | Page 1 | 8 of 56 | 10/10 10. | 20.10 | Descrivani |
|---|--|--|----------------------------------|----------------------------|--------------------|----------------------|----------------|-------------------------------|
| Fill in this inform | mation to identify your | | | | | | | |
| Debtor 1 | Danielle E. Gratto | n | | | | | | |
| | First Name | Middle Name | | Last Name | | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | | Last Name | | | | |
| | | | | | | | | |
| United States Ba | inkruptcy Court for the: | NORTHERN DIST | RICT OF N | NEW YORK | | | | |
| Case number | | | | | | | | |
| (if known) | | | | | | | _ | Check if this is an |
| | | | | | | | | amended filing |
| Official Forn | n 106E/F | | | | | | | |
| | /F: Creditors W | ho Have Uns | secure | d Claims | | | | 12/15 |
| | | | | | Part 2 for cred | itors with NONF | PRIORITY cla | aims. List the other party to |
| Schedule D: Credit left. Attach the Cor name and case nur | ` , | ured by Property. If m e. If you have no info | ore space is | s needed, copy | the Part you n | eed, fill it out, n | umber the e | ntries in the boxes on the |
| | II of Your PRIORITY Un | | | | | | | |
| | ors have priority unsecured | ciaims against you? | • | | | | | |
| ■ No. Go to F | Part 2. | | | | | | | |
| Yes. | II of Your NONPRIORIT | V Uncopured Claim | | | | | | |
| | | | | | | | | |
| _ ` | ors have nonpriority unsec | <u> </u> | | | | | | |
| ☐ No. You ha | ve nothing to report in this pa | art. Submit this form to | the court wit | th your other sche | edules. | | | |
| Yes. | | | | | | | | |
| unsecured clair | r nonpriority unsecured cla m, list the creditor separately tor holds a particular claim, li | for each claim. For ea | ch claim liste | ed, identify what t | type of claim it i | is. Do not list clai | ms already ir | ncluded in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 Allied A | Account Services, Inc | Last 4 | digits of ac | count number | 0181 | | | \$622.04 |
| | y Creditor's Name | \A/I | 4111 | bt incurred? | | | | |
| | dford Ave. re, NY 11710-3564 | wnen | was the de | ot incurred? | | | | _ |
| | Street City State Zip Code | As of | the date you | u file, the claim | is: Check all the | at apply | | |
| Who incu | irred the debt? Check one. | | | | | | | |
| Debtor | r 1 only | □ Co | ntingent | | | | | |
| ☐ Debtor | r 2 only | ☐ Un | liquidated | | | | | |
| ☐ Debtor | r 1 and Debtor 2 only | ☐ Dis | • | | | | | |
| ☐ At leas | st one of the debtors and and | | | ORITY unsecured | d claim: | | | |
| | if this claim is for a comm | | ident loans | | | . р | | |
| debt Is the clai | im subject to offset? | | ligations aris as priority cl | sing out of a sepa aims | aration agreeme | ent or divorce tha | it you did not | |
| ■ No | - | De | bts to pension | on or profit-sharin | ng plans, and ot | her similar debts | ; | |
| ☐ Yes | | ■ Otl | ner. Specify | Collections | National G | id | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 19 of 56

Debtor 1 Danielle E. Gratton Case number (if known) 4.2 **CBE Group** Last 4 digits of account number 6173 \$123.79 Nonpriority Creditor's Name 1309 Technology Pkwy. When was the debt incurred? Cedar Falls, IA 50613 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections AT&T ☐ Yes 4.3 **Department of Education/Nelnet** Last 4 digits of account number 7471 \$2,505.00 Nonpriority Creditor's Name Attn: Claims Opened 01/19 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.4 **Department of Education/Nelnet** Last 4 digits of account number 8971 \$4,327.00 Nonpriority Creditor's Name Attn: Claims Opened 05/18 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Educational

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 20 of 56

Debtor 1 Danielle E. Gratton Case number (if known) 4.5 Department of Education/Nelnet Last 4 digits of account number 8871 \$3.500.00 Nonpriority Creditor's Name Attn: Claims Opened 05/18 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.6 **Department of Education/Nelnet** Last 4 digits of account number 8272 \$1,812.00 Nonpriority Creditor's Name Attn: Claims Opened 09/14 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.7 **Department of Education/Nelnet** Last 4 digits of account number 8172 \$3,921.00 Nonpriority Creditor's Name Attn: Claims Opened 09/14 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Official Form 106 E/F

Educational

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 21 of 56

Debtor 1 Danielle E. Gratton Case number (if known) 4.8 Department of Education/Nelnet Last 4 digits of account number 1472 \$5.081.00 Nonpriority Creditor's Name Attn: Claims Opened 03/14 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.9 **Department of Education/Nelnet** Last 4 digits of account number 1372 \$2,398.00 Nonpriority Creditor's Name Attn: Claims Opened 03/14 Last Active Po Box 82505 When was the debt incurred? 3/31/19 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Department of Education/Nelnet 1272 \$2,262,00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 03/14 Last Active 121 S 13th St When was the debt incurred? 3/31/19 Lincoln, NE 68508 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Educational

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 22 of 56

1 Danielle E. Gratton Case number (if known)

| Debto | Danielle E. Gratton | —————————————————————————————————————— | Case number (if known) | | |
|-------|---|--|---|------------|--|
| 4.1 | Diversified Consultants, Inc. | Last 4 digits of account number | 2420 | \$651.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one. | When was the debt incurred? As of the date you file, the claim | Opened 05/18 Last Active 11/16 is: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | □Yes | Collection Communic | Attorney Charter ation | | |
| 4.1 | Global Credit & Collection Corp. Nonpriority Creditor's Name | Last 4 digits of account number | 3541 | \$2,140.34 | |
| | 5440 N. Cumberland Ave., Ste. 300 Chicago, IL 60656 | When was the debt incurred? | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | Obligations arising out of a separation agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | ■ Other. Specify Collections | s syncharony walmart | | |
| 4.1 | IC Systems, Inc. Nonpriority Creditor's Name | Last 4 digits of account number | 7614 | \$651.09 | |
| | 444 Highway 96 East PO Box 64378 Saint Paul. MN 55164 | When was the debt incurred? | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | No | Debts to pension or profit-sharing | = : | | |
| | ☐ Yes | ■ Other. Specify Collections | S Spectrum | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 23 of 56 Case number (if known)

| Debtor | 1 Danielle E. Gratton | | Case number (if known) | | | | |
|--------|--|--|--|-------------|--|--|--|
| 4.1 | Iq Data International | Last 4 digits of account number | 7470 | \$7,261.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 39 Bothell, WA 98041 | When was the debt incurred? | Opened 06/17 Last Active 10/16 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | |
| | No | ☐ Debts to pension or profit-sharin | | | | | |
| | Yes | Other. Specify Collection | Attorney Village Green Apts Ny | | | | |
| 4.1 | Jefferson Capital Systems, LLC Nonpriority Creditor's Name | Last 4 digits of account number | 9003 | \$778.00 | | | |
| | Po Box 1999 Saint Cloud, MN 56302 | When was the debt incurred? | Opened 10/16 Last Active 03/16 | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | ☐ Yes | ■ Other. Specify Direct Mrkt | | | | | |
| 4.1 | Kia Motors Finance Nonpriority Creditor's Name | Last 4 digits of account number | 3012 | \$15,399.00 | | | |
| | Attn: Bankruptcy Po Box 20825 Fountain Valley, CA 92728 | When was the debt incurred? | Opened 11/15 Last Active 4/09/17 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | □ Yes | Other. Specify Lease | | | | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 24 of 56

| Nonpriority Creditor's Name Kohls Credit Po Box 3120 Milway koo WI 53301 | | | |
|--|--|---|------|
| Po Box 3120 | | Opened 40/44 Leat Active | |
| Milwaukoo WI 52201 | When was the debt incurred? | Opened 10/14 Last Active 09/16 | |
| Milwaukee, WI 53201 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| _ | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | a Claim. | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | nation agreement of avoice that you did not | |
| No | Debts to pension or profit-sharin | ig plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| MCM | Last 4 digits of account number | 0023 | \$65 |
| Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ00 |
| 2365 Northside Drive | When was the debt incurred? | | |
| San Diego, CA 92108 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Collections | Comenity Bank | |
| Midland Funding | Last 4 digits of account number | 6900 | \$65 |
| Nonpriority Creditor's Name | | | |
| 2365 Northside Dr Ste 300 | When was the debt incurred? | Opened 06/17 Last Active 10/16 | |
| San Diego, CA 92108 Number Street City State Zip Code | As of the date you file, the claim i | is: Chack all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim i | S. Offeck all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| · · · | · | Company Account Comenity | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 25 of 56

| Debtor | 1 Danielle E. Gratton | | Case number (if known) | |
|--------|--|--|--|------------|
| 4.2 | | | | |
| 0 | National Grid | Last 4 digits of account number | <u>x</u> | Unknown |
| | Nonpriority Creditor's Name Bankruptcy Department 300 Erie Blvd. West | When was the debt incurred? | | |
| | Syracuse, NY 13202 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | Пол | | |
| | Debtor 2 only | ☐ Contingent☐ Unliquidated | | |
| | | ' | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | At least one of the debtors and another | Student loans | a diami. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | • | Debts to pension or profit-sharin | a plane, and other similar debte | |
| | No | | | |
| | Yes | Other. Specify Collections | <u>; </u> | |
| 4.2 | National Recovery Agency Nonpriority Creditor's Name | Last 4 digits of account number | 6710 | \$74.00 |
| | Attn: Bankruptcy | | Opened 12/16 Last Active | |
| | Po Box 67015 | When was the debt incurred? | 05/16 | |
| | Harrisburg, PA 17106 | = | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | _ | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d alaim. | |
| | At least one of the debtors and another | Student loans | a Claim. | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | ■ Other. Specify Collection | Attorney St Joseph S Medical Pc | |
| 4.2 | Portfolio Recovery | Last 4 digits of account number | 3541 | \$2,140.00 |
| | Nonpriority Creditor's Name | | Opened 07/49 Leet Active | |
| | Po Box 41021 Norfolk, VA 23541 | When was the debt incurred? | Opened 07/18 Last Active 05/16 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Bank | Company Account Synchrony | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 26 of 56

Case number (if known)

| | Dumono El Gratton | | | |
|----------|---|--|--|------------|
| 4.2 3 | Portfolio Recovery | Last 4 digits of account number | 4208 | \$3,151.00 |
| | Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541 | When was the debt incurred? | Opened 09/17 Last Active 04/16 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | ■ Other. Specify Bank | Company Account Synchrony | |
| 4.2 4 | Simon's Agency, Inc. | Last 4 digits of account number | 3217 | \$425.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5026 Syracuse, NY 13220 | When was the debt incurred? | Opened 10/14 Last Active 8/28/15 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | • | |
| | Yes | Other. Specify Collection | Attorney Cny Womens Heal | |
| 4.2 5 | Syncb/Toys R Us Nonpriority Creditor's Name | Last 4 digits of account number | 0474 | \$724.00 |
| | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 09/15 Last Active 10/12/16 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Charge Acc | count | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 27 of 56

Debtor 1 Danielle E. Gratton

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 25,806.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 36,054.81 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 61,860.81 |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 28 of 56

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------|-------------------|-------------|--|--|--|--|
| Debtor 1 | Danielle E. Gratto | on | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | | | |
| Case number | | | | | | | |
| (if known) | | | | | | | |
| | | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Carl Richardson | 6 month lease of apartment |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

| | | Docume | ent Page 29 of 5 | 56 | 0.10 Describant |
|--|--|--|--|------------------------------------|--|
| Fill in th | is information to identify your | case: | | | |
| Debtor 1 | | on | | | |
| D - h 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, | | Middle Name | Last Name | | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case nu | mber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Offici | al Form 106H | | | | |
| | dule H: Your Code | ehtors | | | 12/15 |
| 30110 | daic II. Ioai oca | | | | 12/13 |
| your nan 1. D □ N ■ Y 2. W | | . Answer every question you are filing a joint case, I lived in a community pr | do not list either spouse as coperty state or territory? | a codebtor. (Community property s | |
| _ | | Trovada, from Moxico, Fe | ono moo, roxao, maomingi | on, and wideonomy | |
| _ | lo. Go to line 3. | | a with way at the ation of | | |
| ЦΥ | es. Did your spouse, former spou | use, or legal equivalent live | e with you at the time? | | |
| in li: Fori | ne 2 again as a codebtor only it | f that person is a guaran | tor or cosigner. Make sur | e you have listed the | vith you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and Zli | P Code | | Column 2: The credit | tor to whom you owe the debt that apply: |
| 3.1 | Daniel P. Gratton | | | ☐ Schedule D, line | |
| 0.1 | 109 Hiram Ave | | | ☐ Schedule E/F, lir | |
| | Liverpool, NY 13088 | | | ☐ Schedule G | |
| | father | | | AmeriCII | |

AmeriCU

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 30 of 56

| Del | tor 1 Danielle E. | Gratton | | |
|--------|--|--|--|--|
| | tor 2 | | | |
| Uni | ed States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF NEW YORK | |
| (If kr | e number ficial Form 106l | | - | Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| | _ | | | MM / DD/ YYYY |
| S | chedule I: Your Inc | ome | | 12/1 |
| | <u> </u> | | onal pages, write your name and | case number (if known). Answer every question |
| Par | Describe Employment | | onal pages, write your name and | case number (if known). Answer every question |
| | <u> </u> | | Debtor 1 | Debtor 2 or non-filing spouse |
| Par | Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with | | Debtor 1 ■ Employed | Debtor 2 or non-filing spouse ■ Employed |
| Par | Describe Employment Fill in your employment information. If you have more than one job, | | Debtor 1 ■ Employed □ Not employed | Debtor 2 or non-filing spouse |
| Par | Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or | | Debtor 1 ■ Employed | Debtor 2 or non-filing spouse ■ Employed |
| Par | Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. | Employment status | Debtor 1 ■ Employed □ Not employed Customer Service | Debtor 2 or non-filing spouse ■ Employed |
| Par | Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or | Employment status Occupation | Debtor 1 ■ Employed □ Not employed Customer Service Representative | Debtor 2 or non-filing spouse ■ Employed |
| Par | Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student | Employment status Occupation Employer's name | Debtor 1 ■ Employed □ Not employed Customer Service Representative DL Manufactuaring Inc. 340 Gateway Park Drive Syracuse, NY 13212 | Debtor 2 or non-filing spouse ■ Employed |
| Par | Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. | Employment status Occupation Employer's name Employer's address How long employed to | Debtor 1 ■ Employed □ Not employed Customer Service Representative DL Manufactuaring Inc. 340 Gateway Park Drive Syracuse, NY 13212 | Debtor 2 or non-filing spouse ■ Employed □ Not employed |

For Debtor 1 For Debtor 2 or non-filing spouse **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 0.00 3,024.67 2. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,024.67 0.00

Official Form 106I Schedule I: Your Income page 1

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 31 of 56

| Deb | tor 1 | Danielle E. Gratton | | С | Case number (if know | 7) | | | | |
|-----|--|---|----------|-----|----------------------|----------|------------|-----------|-------------------|----------------|
| | | | | | For Debtor 1 | | | Debtor 2 | | |
| | C | willing 4 hours | 4 | | r 2.004.0 | _ | | filing sp | | |
| | Сор | y line 4 here | 4. | | \$3,024.6 | _ | \$ | | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ 605.5 | 8_ | \$ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | 0 | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ 90.7 | | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ 0.0 | _ | \$ | | 0.00 | |
| | 5e. | Insurance | 5e | | \$ 0.0 | _ | \$ | | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | | \$ 0.0 | _ | \$ | | 0.00 | |
| | 5g. 5h. | Union dues Other deductions. Specify: Vision | 5g 5h | | \$ 0.0 \$ 4.5 | _ | \$ + \$ | | 0.00 | |
| | | · · · · · · · · · · · · · · · · · · · | _ | | | | · : — | | | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ <u>700.9</u> | | \$ | | 0.00 | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ 2,323.7 | 6 | \$ | | 0.00 | |
| 8. | List 8a. | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 0.0 | | ¢ 0.0 | • | ¢ | | 0.00 | |
| | 8h | • | | | · | | | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | \$ | | 0.00 | |
| | 8d. | Unemployment compensation | 8d | l. | \$ 0.0 | 0 | \$ | | 0.00 | |
| | 8e. | Social Security | 8e | ٠. | \$ 0.0 | 0 | \$ | | 0.00 | |
| | | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: WIC | 8f. | | | | \$ | | 0.00 | |
| | - | | | | • | | · · | | | |
| | 8n. | Other monthly income. Specify: | _ 8n | 1.+ | \$ 0.0 | <u> </u> | ⊦ \$ | | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 55.0 | 0 | \$ | | 0.00 | |
| 10 | Cald | culate monthly income. Add line 7 + line 9 | 10. | \$ | 2 378 76 | \$ | | 0 00 - | = \$ | 2 378 76 |
| 10. | | | | Ψ_ | 2,370.70 | Ψ_ | | 0.00 |]Ψ — | 2,370.70 |
| 11. | List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: WIC 8f. \$ 55.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h. + \$ 0.00 \$ 0.00 | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The result in the summary of Schedules and Statistical Summary of Certain ies | | | | | | 12. | \$ | 2,378.76 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form? | ? | | | | | | Combin nonthly | ed / income |
| | _ | No. | | | | | | | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 32 of 56

| | | | | | | 1 | | |
|----------------|----------------------------|--|----------------------|--|--|-------------|---------------------------------------|--|
| Fill f | n this informa | tion to identify yo | our case: | | | | | |
| Debt | or 1 | Danielle E. G | Fratton | | | | eck if this is: | |
| Debt | | | | | | | A supplement sh | owing postpetition chapter |
| (Spo | use, if filing) | | | | | | 13 expenses as | of the following date: |
| Unite | ed States Bankr | uptcy Court for the | : NORTI | HERN DISTRICT OF NEW | YORK | | MM / DD / YYYY | |
| Case (If kn | e number lown) | | | | | | | |
| | | rm 106J | _ | | | • | | |
| | | J: Your | | | Climanda madhan b | | | 12/15 |
| info | rmation. If m | | eded, atta | . If two married people and the control of the cont | | | | |
| Part | | ibe Your House | hold | | | | | |
| 1. | Is this a joir | nt case? | | | | | | |
| | ■ No. Go to | | in a conar | ate household? | | | | |
| | □ res. Doe | | iii a sepai | ate nousenoid: | | | | |
| | = :: | - | st file Offic | ial Form 106J-2, Expenses | s for Separate House | ehold of De | ebtor 2. | |
| 2. | Do vou have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | Danishtan | | _ | □ No |
| | dependents | names. | | | Daughter | | 2 | _ |
| | | | | | Daughter | | 4 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | _ |
| | | | | | | | | □ No □ Yes |
| 3. | , , | enses include | | l _{No} | | | | |
| | | f people other t d your depende | han ${}_{\sqsubset}$ | Yes | | | | |
| Part | 2: Estim | ate Your Ongoi | na Month | lv Expenses | | | | |
| Esti expe | mate your ex | cpenses as of yo | our bankr | uptcy filing date unless y | | | | hapter 13 case to report of the form and fill in the |
| Incl | ude expense | s paid for with | non-cash | government assistance i | f vou know | | | |
| the | | h assistance an | | cluded it on Schedule I: \ | | | Your ex | penses |
| 4. | | or home owners and any rent for the | | nses for your residence. I or lot. | nclude first mortgage | | \$ | 675.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | • | rty, homeowner's | | | | 4b. | · | 0.00 |
| | | | | upkeep expenses | | 4c. | · · · · · · · · · · · · · · · · · · · | 20.00 |
| 5. | | owner's associat | | aominium aues our residence. such as ho | me equity loans | 4d. 5. | · · | 0.00 0.00 |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 33 of 56

| Danielle E. Gratton | Case num | ber (if known) | |
|---|--|--|---|
| s: | | | |
| Electricity, heat, natural gas | 6a. | \$ | 100.00 |
| Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 120.00 |
| Other. Specify: Cable & Internet | 6d. | \$ | 86.00 |
| Netflix | | \$ | 11.99 |
| and housekeeping supplies | | \$ | 325.00 |
| | | \$ | 258.00 |
| | | | 25.00 |
| | | · · | 50.00 |
| · · · · · · · · · · · · · · · · · · · | | | 30.00 |
| • | | | 30.00 |
| | 12. | \$ | 224.00 |
| ainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 20.00 |
| able contributions and religious donations | 14. | \$ | 10.00 |
| nce. | | | |
| include insurance deducted from your pay or included in lines 4 or 20. | | | |
| Life insurance | 15a. | \$ | 0.00 |
| Health insurance | 15b. | \$ | 0.00 |
| Vehicle insurance | 15c. | \$ | 130.00 |
| Other insurance. Specify: | 15d. | \$ | 0.00 |
| . Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| ment or lease payments: | | | |
| Car payments for Vehicle 1 | 17a. | \$ | 276.00 |
| Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| Other. Specify: | 17c. | \$ | 0.00 |
| Other. Specify: | 17d. | \$ | 0.00 |
| payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5. Schedule I. Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| payments you make to support others who do not live with you. | | \$ | 0.00 |
| y: | 19. | | |
| real property expenses not included in lines 4 or 5 of this form or on Sche | dule I: Yo | our Income. | |
| Mortgages on other property | 20a. | \$ | 0.00 |
| Real estate taxes | 20b. | \$ | 0.00 |
| Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Specify: | | · | 0.00 |
| · · · - | | | |
| · · | | | |
| | | · | 2,360.99 |
| opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| dd line 22a and 22b. The result is your monthly expenses. | | \$ | 2,360.99 |
| ate your monthly net income. | | _ | |
| | | · | 2,378.76 |
| Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,360.99 |
| Subtract your monthly expenses from your monthly income. | 224 | ¢ | 17.77 |
| The result is your monthly net income. | 23C. | Ψ | 11.77 |
| mple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage? | | | e or decrease because of a |
| | | | |
| | Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cable & Internet Netflix and housekeeping supplies are and children's education costs ng, laundry, and dry cleaning nal care products and services al and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations nce. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Vehicle insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. (*) ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other of limport and support that you did not report as ted from your pay on line 5, Schedule 1, Your Income (Official Form 1061), payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule 1, Your Income (Official Form 1061), payments you make to support others who do not live with you. (*) real property expenses not included in lines 4 or 5 of this form or on Sche Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Specify: ate your monthly expenses did lines 4 through 21. opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 did line 22a and 22b. The result is your monthly expenses. ate your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. Copy yion 1 (1) (1) (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2 | Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Eleghone, cell phone, Internet, satellite, and cable services Cother. Specify: Cable & Internet And housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations nee. include insurance deducted from your pay or included in lines 4 or 20. Life insurance teleit insurance teleit insurance teleit insurance teleit insurance teleit insurance teleit on telease payments: Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments of vehicle 2 Other. Specify: Dither. Specify | SE Electricity, heat, natural gas Water, sewer, garbage collection Gb. \$ Felephone, cell phone, Internet, satellite, and cable services Gc. \$ Chter, Specify: Cable & Internet Gd. \$ Netflix and housekeeping supplies Tr. \$ Sare and children's education costs gr. \$ are are and broad and services gr. \$ are are and broad and services gr. \$ are |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 34 of 56

| | mation to identify your | | | | |
|---------------------------------------|--|--------------------------|--------------------------|--|--|
| Debtor 1 | Danielle E. Gratto | Middle Name | Last Name | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| f two married po fou must file thi | eople are filing together | n connection with a bank | nsible for supplying co | rrect information. s. Making a false statemer | nt, concealing property, or r imprisonment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | tcy Petition Preparer's Notice, d Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules file | ed with this declaration ar | nd |
| X /s/ Dar | nielle E. Gratton | | X | | |
| Daniel | Ile E. Gratton ure of Debtor 1 | | Signature o | f Debtor 2 | |
| Date | April 19, 2019 | | Date | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 35 of 56

| Eil | l in this inform | nation to identify you | r casa: | | | |
|-----|----------------------------|--------------------------------|---|---|--|---|
| | btor 1 | Danielle E. Gratt | | | | |
| De | DIOI I | First Name | Middle Name | Last Name | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Co | aa aumhar | | | | | |
| | nown) | | | | | ☐ Check if this is an amended filing |
| ~ | · · · · - | 407 | | | | |
| | fficial Fo | | Affaina fan India | iduala Filipa far | Donkruntov | |
| | | | | iduals Filing for | | 4/1 |
| | | | | e are filing together, both a this form. On the top of a | | |
| | | n). Answer every que | | | , | , |
| Pa | rt 1: Give D | Details About Your Ma | rital Status and Where Yo | ou Lived Before | | |
| 1. | What is you | r current marital statu | ıe? | | | |
| •• | | r carrent maritar state | | | | |
| | ☐ Married | | | | | |
| | ■ Not mai | rried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | n where you live now? | | |
| | □ No | | | | | |
| | _ | st all of the places you I | ived in the last 3 years. Do | not include where you live n | ow. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor lived there | 1 Debtor 2 Prior | Address: | Dates Debtor 2 |
| | 21 Plantat | ion Blvd. | From-To: | ☐ Same as Debte | or 1 | ☐ Same as Debtor 1 |
| | Apt. 1 | NV 42000 | Feb. 2017 - August 2018 | | | From-To: |
| | Liverpooi, | , NY 13088 | August 2010 | • | | |
| | es and territor | <i>ies</i> include Arizona, Ca | lifornia, Idaho, Louisiana, N nedule H: Your Codebtors (| levada, New Mexico, Puerto | | erritory? (Community property and Wisconsin.) |
| _ | Distant 1 | | | | | |
| 4. | Fill in the tota | al amount of income yo | u received from all jobs and | ing a business during this I all businesses, including pa ive together, list it only once | art-time activities. | s calendar years? |
| | □ No | | | | | |
| | Yes. Fil | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | | | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 36 of 56
Case number (if known)

Debtor 1 Danielle E. Gratton

| | Debtor 1 | | Debtor 2 | |
|---|---|---|---|---|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$10,978.22 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| For last calendar year: (January 1 to December 31, 2018) | ■ Wages, commissions, bonuses, tips | \$31,867.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$28,085.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| List each source and the gross inco ☐ No ☐ Yes. Fill in the details. | ome from each source separa Debtor 1 Sources of income | tely. Do not include income the | Debtor 2 Sources of income | Gross income |
| | Describe below. | each source (before deductions and exclusions) | Describe below. | (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2018) | WIC | \$788.00 | | |
| For the calendar year before that: (January 1 to December 31, 2017) | wic | \$2,160.00 | | |
| Part 3: List Certain Payments You | Made Before You Filed for | Bankruptcy | | |
| • | | . , | | |
| | • | umer debts. Consumer debts | are defined in 11 U.S.C. § 10 | 1(8) as "incurred by an |
| During the 90 days before No. Go to line 7 | ore you filed for bankruptcy, di | d you pay any creditor a total | of \$6,825* or more? | |
| paid that cr not include | editor. Do not include paymer payments to an attorney for the | nts for domestic support obligations in the standard support of the standard standard support of the standard support support support of the standard support | n one or more payments and t ations, such as child support a | nd alimony. Also, do |
| * Subject to adjustmen | t on 4/01/22 and every 3 year | s after that for cases filed on | or after the date of adjustment | |
| Yes. Debtor 1 or Debtor 2 o During the 90 days before | or both have primarily consure you filed for bankruptcy, di | | of \$600 or more? | |
| ■ No. Go to line 7 | · . | | | |
| ☐ Yes List below einclude pay | each creditor to whom you pai | | the total amount you paid tha ort and alimony. Also, do not i | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 37 of 56 Debtor 1 Danielle E. Gratton Case number (if known) Amount you **Creditor's Name and Address Dates of payment Total amount** Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

■ No

Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

court-appointed receiver, a custodian, or another official?

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main

Page 38 of 56 Document Case number (if known) Debtor 1 Danielle E. Gratton Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Peter C. Schaefer, Esq. attorney fee and filing fee \$1,380.00 313 E. Willow St. Suite 105 Syracuse, NY 13203 schapc@aol.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

Yes. Fill in the details.

Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Page 39 of 56
Case number (if known) Document

Debtor 1 Danielle E. Gratton

| 18. | transferred in the ordir Include both outright transfer include gifts and transfer No | nary course of your bus nafers and transfers mad as that you have already l | iness or financial aff e as security (such as | airs? the granting of a | | property to anyone, other | |
|-----|--|---|---|------------------------------|--------------|--|--|
| | Yes. Fill in the deta | ils. | | | | | |
| | Person Who Received Address | Transfer | Description and property transfer | | payme | be any property or ents received or debts n exchange | Date transfer was made |
| | Person's relationship | to you | | | | Ū | |
| 19. | beneficiary? (These are | often called asset-prote | | ny property to a | self-settled | d trust or similar device o | of which you are a |
| | ☐ Yes. Fill in the deta | IIS. | | | | | |
| | Name of trust | | Description and | value of the prop | erty trans | ferred | Date Transfer was made |
| Par | rt 8: List of Certain Fi | nancial Accounts, Instr | uments, Safe Deposi | t Boxes, and Sto | orage Units | s | |
| 20. | sold, moved, or transfe Include checking, savi | erred? ngs, money market, or | other financial accou | nts; certificates | of deposit | ld in your name, or for yo | |
| | houses, pension funds | , cooperatives, associa | itions, and other fina | ncial institutions | S. | | |
| | No | | | | | | |
| | Yes. Fill in the det | ails. | | | | | |
| | Name of Financial Inst Address (Number, Street, Code) | | ast 4 digits of account number | Type of accourant instrument | int or | Date account was closed, sold, moved, or transferred | Last balanc before closing c transfe |
| 21. | Do you now have, or di cash, or other valuable | | ar before you filed fo | r bankruptcy, an | y safe dep | osit box or other deposi | tory for securities, |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the det | ails | | | | | |
| | | | | | | | |
| | Name of Financial Inst Address (Number, Street, | | Who else had acc Address (Number, S State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| 22. | Have you stored prope | rty in a storage unit or | place other than you | r home within 1 | year befor | e you filed for bankrupto | y? |
| | No | | | | | | |
| | ☐ Yes. Fill in the det | ails. | | | | | |
| | Name of Storage Facil Address (Number, Street, | | Who else has or to it? Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| Par | rt 9: Identify Property | You Hold or Control fo | r Someone Else | | | | |
| 23. | Do you hold or control for someone. | any property that some | eone else owns? Incl | ude any propert | y you borr | owed from, are storing f | or, or hold in trust |
| | ■ No □ Yes. Fill in the de | tails. | | | | | |
| | Owner's Name Address (Number, Street, | City, State and ZIP Code) | Where is the pro (Number, Street, City, S Code) | | Describe t | the property | Valu |
| Par | rt 10: Give Details Abo | ut Environmental Infori | mation | | | | |
| For | the purpose of Part 10, | the following definition | s apply: | | | | |
| | | | | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 40 of 56 Case number (if known)

Debtor 1 Danielle E. Gratton

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | naz | ardous material, pollutant, contaminant, | or similar term. | | | | | |
|--|---|--|--|-------|--|--------------------|--|--|
| Rep | ort a | Il notices, releases, and proceedings that | at you know about, regardless of wher | n the | ey occurred. | | | |
| 24. | I. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | |
| 25. | Hav | e you notified any governmental unit of | any release of hazardous material? | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | |
| 26. | Hav | e you been a party in any judicial or adn | ninistrative proceeding under any envi | ironr | mental law? Include settlements | and orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | With | nin 4 years before you filed for bankrupt | cy, did you own a business or have an | ny of | the following connections to any | / business? | | |
| | | ☐ A sole proprietor or self-employed in | n a trade, profession, or other activity, | eith | er full-time or part-time | | | |
| | | ☐ A member of a limited liability comp | any (LLC) or limited liability partnersh | ip (L | .LP) | | | |
| | | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | |
| | | No. None of the above applies. Go to F | art 12. | | | | | |
| | | Yes. Check all that apply above and fill | in the details below for each business | s. | | | | |
| | | siness Name dress | Describe the nature of the business | | Employer Identification numbe | | | |
| | | nber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Includinstitutions, creditors, or other parties. | | ude all financial | | | | | | |
| | | No Yes. Fill in the details below. | | | | | | |
| | | | Date Issued | | | | | |
| | | | | | | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 41 of 56

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Danielle E. Gratton

Danielle E. Gratton

Signature of Debtor 2

Signature of Debtor 1

Date April 19, 2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 42 of 56

| Fill in this informs | ation to identify your | | | |
|---------------------------------------|--|--|---|---|
| Fill in this informa | ation to identify your | ease: | | |
| Debtor 1 | Danielle E. Gratto | Middle Name | Last Name | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bank | cruptcy Court for the: | NORTHERN DIS | TRICT OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official For | m 108 | | | |
| Statement | t of Intentio | n for Indiv | iduals Filing Under Chapte | er 7 12/15 |
| | | | - | |
| | dual filing under cha | | l out this form if: | |
| _ | claims secured by yo | | at avaired | |
| You must file this | er is earlier, unless th | ithin 30 days after | or expired. you file your bankruptcy petition or by the date se e time for cause. You must also send copies to the | |
| If two married peo | ple are filing together | in a joint case, bo | oth are equally responsible for supplying correct in | nformation. Both debtors must |
| • | date the form. | | | |
| | d accurate as possib ir name and case nur | | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| Part 1: List You | ır Creditors Who Have | Socured Claims | | |
| - | | | | |
| 1. For any creditor information below | • | art 1 of Schedule D | : Creditors Who Have Claims Secured by Property | (Official Form 106D), fill in the |
| | itor and the property the | nat is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | | | | |
| | nericu Cu | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | ■ Yes |
| Description of | 2014 Chevrolet Cru | ıze 65000 | Retain the property and enter into a Reaffirmation Agreement. | – res |
| property | miles | u - J 4/04/40 | ☐ Retain the property and [explain]: | |
| securing debt: | Joint with father ti | tied 1/31/19 | - | _ |
| Part 2: List You | ır Unexpired Persona | I Property Leases | | |
| For any unexpired in the information | personal property le below. Do not list rea | ase that you listed I estate leases. Un | in Schedule G: Executory Contracts and Unexpire leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(| e lease period has not yet ended. |
| Tou may assume a | in unexpired persona | i property lease ii | the trustee does not assume it. 11 0.3.6. § 363(p)(| 2 j. |
| Describe your une | expired personal prop | perty leases | | Will the lease be assumed? |
| Lessor's name: | Carl Richards | on | | □ No |
| | | | | ■ Yes |
| | | | | - 165 |
| Description of lease | ed 6 month lease | of apartment | | |
| Property: | | | | |
| D | 1 | | | |
| Part 3: Sign Be | low | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 43 of 56

| Deb | Danielle E. Gratton | Case number (if known) |
|-----|---|---|
| | ler penalty of perjury, I declare that I have indicated moerty that is subject to an unexpired lease. | ny intention about any property of my estate that secures a debt and any personal |
| Χ | /s/ Danielle E. Gratton | X |
| | Danielle E. Gratton | Signature of Debtor 2 |
| | Signature of Debtor 1 | |
| | Date April 19, 2019 | Date |

| Fill i | n this information to identify your case: | | | | | irected in this form and | l in Form |
|---------|---|------------------------------------|-------------------------------------|-------------------------|----------------|---|--------------------------------|
| Deb | tor 1 Danielle E. Gratton | | 122 | 2A-1Sup | 0: | | |
| Deb | tor 2 | | | _ | | | |
| | se, if filing) | | ' | ■ 1. The | ere is no pres | umption of abuse | |
| Unit | ed States Bankruptcy Court for the: Northern District of | New York | | | | o determine if a presur | |
| | Totalon Ballia aproj Court for the. | 1011 1011 | | | | nade under <i>Chapter 7</i> | Means Test |
| | e number | | . | | ` | icial Form 122A-2). | |
| (if kno | wij | | | | | does not apply now be service but it could ap | |
| | | | | ☐ Chec | k if this is a | n amended filing | |
| Off | icial Form 122A - 1 | | | | | g | |
| | | ront Moi | athly loo | m . | | | 10/15 |
| Cn | apter 7 Statement of Your Cur | ent wor | ithly inc | ome | | | 12/15 |
| attacl | complete and accurate as possible. If two married people an a separate sheet to this form. Include the line number to whousher (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income | nich the additior a presumption | nal information a of abuse becau | applies. O se you do | n the top of a | ny additional pages, wri narily consumer debts o | te your name and or because of |
| 1. | What is your marital and filing status? Check one onl | y. | | | | | |
| | ■ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | ☐ Married and your spouse is filing with you. Fill out | hoth Columns | A and B lines | 2-11 | | | |
| | ☐ Married and your spouse is NOT filing with you. Y | | | 2 11. | | | |
| | ☐ Living in the same household and are not legal | - | • | Jumpe A | and B. lings (| 0 11 | |
| | ☐ Living separately or are legally separated. Fill o | | | | | | u dooloro undor |
| | penalty of perjury that you and your spouse are le living apart for reasons that do not include evading | gally separated | d under nonban | kruptcy I | aw that applic | es or that you and you | |
| | Il in the average monthly income that you received from all s | | | | | | |
| th | 11(10A). For example, if you are filing on September 15, the 6-more 6 months, add the income for all 6 months and divide the total k | y 6. Fill in the res | sult. Do not includ | de any inc | ome amount m | ore than once. For examp | ole, if both |
| SI. | ouses own the same rental property, put the income from that pr | perty in one con | uriiri Oriiy. II you II | Column | • • | Column B | Jace. |
| | | | | Debtor | | Debtor 2 or | |
| | | | | | | non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime, a payroll deductions). | nd commissio | ons (before all | \$ | 2,851.33 | \$ | |
| 3. | Alimony and maintenance payments. Do not include p Column B is filled in. | ayments from | a spouse if | \$ | 0.00 | \$ | |
| 4. | All amounts from any source which are regularly pai | d for househo | old expenses | | | | |
| | of you or your dependents, including child support. | | | | | | |
| | from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo | | | | | | |
| | filled in. Do not include payments you listed on line 3. | race of my in each | ann Bio not | \$ | 0.00 | \$ | |
| 5. | Net income from operating a business, profession, o | | | | | | |
| | | | otor 1 | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 | | | | | |
| | Ordinary and necessary operating expenses | -\$ 0.00 | | • | 0.00 | | |
| | Net monthly income from a business, profession, or farm | 1 \$ | Copy here -> | \$ | 0.00 | \$ | |
| 6. | Net income from rental and other real property | Dak | otor 1 | | | | |
| | One and a second to the form all the first | \$ 0.00 | otor 1 | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 -\$ 0.00 | | | | | |
| | Ordinary and necessary operating expenses | 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| | Net monthly income from rental or other real property | \$ | John Heie -> | - | 0.00 | \$ | |
| 7. | Interest, dividends, and royalties | | | \$ | 0.00 | • | |

Official Form 122A-1

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Page 45 of 56 Document Debtor 1 Danielle E. Gratton Case number (if known) Column A Column B **Debtor 1** Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. . WIC 32.50 0.00 Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 2.883.83 2,883.83 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2,883.83 Multiply by 12 (the number of months in a year) 12 34,605.96 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. NY

3 Fill in the number of people in your household.

Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions

for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.

Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2.

Part 3:

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Danielle E. Gratton

Danielle E. Gratton Signature of Debtor 1

Date April 19, 2019

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

83,887.00

13.

Debtor 1 Danielle E. Gratton

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2018 to 03/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: DL Manufacturing

Income by Month:

| 6 Months Ago: | 10/2018 | \$2,632.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 11/2018 | \$3,290.00 |
| 4 Months Ago: | 12/2018 | \$2,632.00 |
| 3 Months Ago: | 01/2019 | \$2,632.00 |
| 2 Months Ago: | 02/2019 | \$2,632.00 |
| Last Month: | 03/2019 | \$3,290.00 |
| | Average per month: | \$2,851.33 |

Line 10 - Income from all other sources

Source of Income: **WIC** Income by Month:

| 6 Months Ago: | 10/2018 | \$65.00 |
|---------------|--------------------|---------|
| 5 Months Ago: | 11/2018 | \$65.00 |
| 4 Months Ago: | 12/2018 | \$65.00 |
| 3 Months Ago: | 01/2019 | \$0.00 |
| 2 Months Ago: | 02/2019 | \$0.00 |
| Last Month: | 03/2019 | \$0.00 |
| | Average per month: | \$32.50 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of New York

| In r | re Danielle E. Gratton | | Case No. | |
|------|---|--|---------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF CO | OMPENSATION OF ATTOR | NEY FOR DE | EBTOR(S) |
| 1. | Pursuant to 11 U .S.C. § 329(a) and Fed. Bank compensation paid to me within one year befo be rendered on behalf of the debtor(s) in conte | re the filing of the petition in bankruptcy, of | r agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accep | t | \$ | 975.00 |
| | Prior to the filing of this statement I have | received | \$ | 975.00 |
| | | | | 0.00 |
| 2. | The source of the compensation paid to me wa | as: | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me i | s: | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-discle | osed compensation with any other person u | nless they are mem | bers and associates of my law firm. |
| 5. | ☐ I have agreed to share the above-disclosed copy of the agreement, together with a list In return for the above-disclosed fee, I have agreement. | of the names of the people sharing in the c | ompensation is atta | ached. |
| | a. [Other provisions as needed] Preparation and filing of Re-Aff | irmation agreements | | |
| 6. | | sclosed fee does not include the following so n pursuant to 11 USC Section 522(f) for n any dischargeability actions, relief | or avoidance of | |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete stater bankruptcy proceeding. | ment of any agreement or arrangement for p | payment to me for r | epresentation of the debtor(s) in |
| / | April 19, 2019 | /s/ Peter C Schaefe | er, Esq. | |
| 1 | Date | Peter C Schaefer, I | Esq. 510900 Nev | v York |
| | | Signature of Attorney Peter C. Schaefer, | Esq. | |
| | | 313 East Willow St Suite 105 | reet | |
| | | Suite 105 Syracuse, NY 1320 | 3-1905 | |
| | | (315)478-2020 Fax | c: (315)478-5336 | |
| | | schapc@aol.com Name of law firm | | |
| | | rame oj taw jirm | | |

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 52 of 56

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK

| In re | Danielle E. Gratton | , |
|----------|--|--|
| | Debtor | Case No. |
| Social | Security No(s). and all Employer's Tax Identification N 3968 | Chapter 7 No(s). [if any] |
| | CERTIFICATION OF MAI | LING MATRIX |
| | $I,\!(we), \ \ \text{Peter C Schaefer, Esq. 510900 New York} \ , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor , the attor $ | rney for the debtor/petitioner (or, if appropriate, |
| the deb | tor(s) or petitioner(s)) hereby certify under the penaltie | s of perjury that the above/attached mailing |
| matrix | has been compared to and contains the names, addresse | es and zip codes of all persons and entities, as the |
| appear | on the schedules of liabilities/list of creditors/list of equ | uity security holders, or any amendment thereto |
| filed he | erewith. | |
| | | |
| Dated | | v C Cabastan Fam |
| | | r C Schaefer, Esq. Schaefer, Esq. 510900 New York |
| | | ey for Debtor/Petitioner |

(Debtor(s)/Petitioner(s))

Allied Account Services, Inc. Acct No x0181 422 Bedford Ave. Bellmore, NY 11710-3564

Americu Cu Acct No xxxxxxx0001 Attn: Bankruptcy 1916 Black River Boulevard Rome, NY 13440

CBE Group Acct No x6173 1309 Technology Pkwy. Cedar Falls, IA 50613

Department of Education/Nelnet Acct No xxxxxxxxxxx7471 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx8971 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx8871 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx8272 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx8172 Attn: Claims Po Box 82505 Lincoln, NE 68501 Department of Education/Nelnet Acct No xxxxxxxxxxx1472 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx1372 Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet Acct No xxxxxxxxxxx1272 121 S 13th St Lincoln, NE 68508

Diversified Consultants, Inc. Acct No xxxx2420 Attn: Bankruptcy Po Box 551268 Jacksonville, FL 32255

Global Credit & Collection Corp. Acct No x3541 5440 N. Cumberland Ave., Ste. 300 Chicago, IL 60656

IC Systems, Inc. Acct No x7614 444 Highway 96 East PO Box 64378 Saint Paul, MN 55164

Iq Data International
Acct No xxxxxxxxxxx7470
Attn: Bankruptcy
Po Box 39
Bothell, WA 98041

Jefferson Capital Systems, LLC Acct No xxxxxxxxx9003 Po Box 1999 Saint Cloud, MN 56302 Kia Motors Finance Acct No xxxxxx3012 Attn: Bankruptcy Po Box 20825 Fountain Valley, CA 92728

Kohls/Capital One Acct No xxxxxxxxxxx4091 Kohls Credit Po Box 3120 Milwaukee, WI 53201

MCM Acct No x0023 2365 Northside Drive San Diego, CA 92108

Midland Funding Acct No xxxxxx6900 2365 Northside Dr Ste 300 San Diego, CA 92108

National Grid Acct No x Bankruptcy Department 300 Erie Blvd. West Syracuse, NY 13202

National Recovery Agency Acct No xxxx6710 Attn: Bankruptcy Po Box 67015 Harrisburg, PA 17106

Portfolio Recovery Acct No xxxxxxxxxxxxx3541 Po Box 41021 Norfolk, VA 23541

Portfolio Recovery Acct No xxxxxxxxxxxx4208 Po Box 41021 Norfolk, VA 23541

Case 19-30544-5-mcr Doc 1 Filed 04/19/19 Entered 04/19/19 16:26:19 Desc Main Document Page 56 of 56

Simon's Agency, Inc. Acct No xx3217 Attn: Bankruptcy Po Box 5026 Syracuse, NY 13220

Syncb/Toys R Us Acct No xxxxxxxxxxx0474 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896